

NH MEDICAL CONTROL BOARD

NH Fire Academy
Concord, NH

MINUTES OF MEETING January 16, 2014

- Members present:** Tom D'Aprix – Chair; Kenneth Call, MD; Ray Kelly; Jim Martin; Douglas McVicar; Joseph Leahy; Mathurin Malby; Frank Hubbell; Patrick Lanzetta .
- Members absent:** Thomas Trimarco; Jim Suozzi; David Hirsch.
- Guests:** Steve Erickson; Michael Flynn, Mark Hastings, Don Welford, Robert Johnson, David Rivers, Steve Robbins, Jason Preston, Mary Ellen Goudeau, Ted White, Joshua Morrison, Christopher Stawasz, Aaron McIntire; Michael Pepin; Kevin Blinn; Stacy Meier; Eric Jaeger; Jeffrey Stewart; Jason Grey; Fred Heinrich; Richard O'Brien; Grant Turpin; Janet Houston; Jeanne Erickson.
- Bureau Staff:** Bureau Chief Mercuri; Vicki Blanchard; Richard Cloutier; Chip Cooper; Kathy Doolan; Shawn Jackson.

Welcome:

The meeting was called to order at 9:20 a.m.

Introductions were made.

Approval of the November 21, 2013 Minutes - Motion was made; seconded and passed to accept the minutes with changes (noted).

Chair D'Aprix brought forth Jonathan Vacik for approval to become a board member (he was not present). Motion was made by J. Martin; seconded by D. McVicar. Motion passed unanimously. Welcome Jonathan!

Bureau/Division Updates – Chief Mercuri

The deputy chief position is at H/R waiting for them to act on. Still moving forward with it.

The Rules will go to JLCAR potentially in March or April.

Physician Orders for Life Sustaining Treatment (POLST) registry is moving forward. There have been discussions with DHHS and E-911. It will create a registry much like Oregon. There are concerns that it is a bit early to have this type of registry. Will keep everyone updated.

AEMT-I bill has been issued a number and has been assigned to a committee. It is moving forward and the Bureau continues to oppose the bill.

Chief Mercuri and Shawn Jackson are looking into the National Registry's continuing competency program; which would change how the refresher/renewal process is done. Instead of the 72 hours of continuing education and refresher hours of each level of provider, the new competency program would drop the hours for each level to Paramedic 60, AEMT 50 and EMT 40. The hours would be divvied out

with a certain number of National Registry required hours, a certain number of State required hours, and a certain number local or individual hours. They will be keeping an eye on this and let us know as more develops.

Community paramedicine program continues to progress slowly. He reports the visiting nurse/homecare association would like to be involved and partner with us on this.

TEMSIS Update – Chip Cooper

Chip said the procedure list is being updated and will come out within the next few weeks. The software license upgrade has arrived for TEMSIS and will be moving to version 3.3 in July. There will be training coming up for this.

AEMT/Education Update – Shawn Jackson

For EMT-Is converting to AEMTs, the test results are still 13% above the national average, with a 73% pass rate. We have issued 422 vouchers and just over one thousand people left to transition. Exam preps have almost doubled in demand over last season. Two more polling kits have been added. Shawn said he has gone through over 400 surveys and the evaluations of the course have been overwhelmingly positive.

They are making preparations to take the PearsonVue mobile testing lab around the state. They have already done two site visits.

Anatomy & Physiology continues to be a struggling point and a point that the National Registry focuses on during the exam. As a result, we have entered into an agreement with Mary Katherine Lockwood, a professor at UNH. She will be here at the Academy for 4 sessions to help.

Shawn stressed that people do not have to wait until refresher season 2016 to take the test. They can take it sooner, thus having more time to act if they should fail at their first attempt.

Coordinating Board Update – Hubbell:

F. Hubbell had some updates from the last meeting (11-21-13). Those minutes are available on the website. He said there was great feedback about the Trauma Conference. There was a good discussion regarding mass gatherings and coming up with a checklist to be utilized.

Trauma Medical Review Committee – Call:

Dr. Call had a brief update. They are continuing to review hospitals in the state and are trying to draw more hospitals into the trauma system as possible, in particular critical access hospitals. The ACS certifies the Level I and II hospitals and the TMRC certifies the Level III and IV hospitals. There was one site visit reported on (Wentworth Douglas) by Drs. Sutton and Gupta. That one was approved at Level III. There was a request to come up with a policy for institutions that advertise themselves as a trauma center that they have some sort of qualification to make that claim. This will be addressed in the updated version of the Rules.

The education committee is trying to come up with more educational opportunities. The long-standing members are looking at ways to try and bring people in. They are trying to find out what is needed to improve trauma care and qualify at one of the levels of certification.

Protocols

Dr. Martin said the subcommittee met last week and went over four main protocols.

Chair D'Aprix asked that the protocols be voted on individually this time.

Anaphylaxis: The anaphylaxis protocol was updated to remove the epinephrine IV push and replaced with an IV infusion.

Motion was made by Joe Leahy, seconded by Kenneth Call; motion passed unanimously.

Seizures: After reviewing the RAMPART study the seizure protocol was revised to move midazolam to the first choice benzodiazepine, with the IM route being the preferred route. Additionally, the doses were increased as reflected in the study. Finally the magnesium sulfate dose for seizure during the 3rd trimester of pregnancy or post partum was modified to include a maintenance infusion.

Motion was made by J. Leahy, seconded by K. Call; motion passed unanimously.

Septic Shock: Added a “Sepsis Alert” notification for patient meets sepsis criteria and Mean Arterial Pressure (MAP) to the assessment.

Under the Paramedic Standing Orders, moved Norepinephrine is the drug of choice, added Epinephrine as second choice vasoconstrictor and removed Dopamine, as evidence does not support its use in shock.

Motion was made by J. Leahy, seconded by K. Call; motion passed unanimously.

Smoke Inhalation: Because the cyanokit is only being manufactured with 5 mg vials the 2.5 gram vial reference was removed from the protocol.

Motion was made by J. Leahy, seconded by K. Call; motion passed unanimously.

Vicki Blanchard presented a short video about the spinal protocol. A discussion followed.

Critical Care Update

Sue Prentiss was not present. Vicki Blanchard updated everyone. She said the surveys went out to the hospitals and received back about 9 or 10 of them. She said she will be making phone calls to try and get feedback.

New England Regional Protocols – Update

Eric Yaeger brought everyone up to date on the PEGASUS project. They are looking into the development of pediatric evidence based guidelines. A pediatric seizure protocol dovetails very closely our own protocol. Hopefully, the guidelines will be adopted by the New England states and parts of Texas. Then gather data on how effective the guidelines are. The project is moving along very well.

Narcotic Diversion

Chair D’Aprix thinks a subcommittee is a good idea to follow up on ways to minimize narcotic diversion. He followed up with the Board of Pharmacy and was given the go ahead. A joint committee between MCB and CB would be best to work to develop best practices and put together a document. Chair D’Aprix asked for some volunteers. Dr D’Aprix will represent the MCB, Vicki Blanchard and Nick Mercuri will represent the BEMS, other community volunteers thus far include: Jason Preston, Jeff Stewart, Mike Flynn, and Aaron McIntire.

Other Topics

Janet Houston reminded everyone that the grant opportunity for child safety seats for ambulances is currently open. She said the application is simple and she will send it out again through the Trauma list serve.

Chief Mercuri is looking for input about training for EMS providers in a “warm zone.” It would be partnered with Police Standards & Training.

Adjournment: 11:10 a.m.

Next Meeting: March 20, 2014 – Fire Academy – Concord NH

Respectfully Submitted,

Tom D'Aprix, MD, Chairman

Prepared by:

Denice McAdoo, Executive Secretary